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REISSUE APPLICATION DECLARATION BY THE INVENTOR

Docket Number (Optional)

I hereby declare that:

Each inventor's residence, mailing address and citizenship are stated below next to their name.

I believe the inventors named below to be the original and first inventor(s) of the subject matter which is described and claimed in patent number 6,481,591 B2, granted NOV. 19, 2002 and for which a reissue patent is sought on the invention entitled LAUNDRY ROLL HAMPER,

the specification of which

☒ is attached hereto.☐ was filed on _____ as reissue application number _____
and was amended on _____
(If applicable)

I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

☐ I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b). Attached is form PTO/SB/02B (or equivalent) listing the foreign applications.

I verily believe the original patent to be wholly or partly inoperative or invalid, for the reasons described below. (Check all boxes that apply.)

☐ by reason of a defective specification or drawing.☒ by reason of the patentee claiming more or less than he had the right to claim in the patent.☐ by reason of other errors.

At least one error upon which reissue is based is described below. If the reissue is a broadening reissue, such must be stated with an explanation as to the nature of the broadening:

To enlarge the scope of the claim along with corresponding amendments to the abstract, background, summary, and detailed description.

[Page 1 of 2]

This collection of information is required by 37 CFR 1.175. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: **Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.***If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.*

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(REISSUE APPLICATION DECLARATION BY THE INVENTOR, page 2)

Docket Number (Optional)

All errors corrected in this reissue application arose without any deceptive intention on the part of the applicant.

Note: To appoint a power of attorney, use form PTO/SB/81.

Correspondence Address: Direct all communications about the application to:

☐ Customer Number:

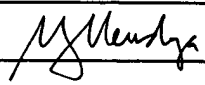
OR

<input type="checkbox"/> Firm or Individual Name	REY Z MENDOZA				
Address	5515 BUGGY WHIP DRIVE				
Address					
City	CENTREVILLE	State	VIRGINIA	Zip	20120
Country	USA				
Telephone	W 202.266.4475 x 7012 H 703.830.7923		Fax	W 202.543.7666	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this declaration is directed.

Full name of sole or first inventor (given name, family name)

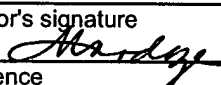
REY ZABAT MENDOZA

Inventor's signature	Date
	10/8/03
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Full name of second joint inventor (given name, family name)

WILHELMINA NAVARRO MENDOZA

Inventor's signature	Date
	10/8/03
Residence	Citizenship
VIRGINIA	US

Mailing Address
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Full name of third joint inventor (given name, family name)

Inventor's signature	Date
Residence	Citizenship
Mailing Address	

☐ Additional joint inventors or legal representative(s) are named on separately numbered sheets forms PTO/SB/02A or 02LR attached hereto.

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**REISSUE APPLICATION: CONSENT OF ASSIGNEE;
STATEMENT OF NON-ASSIGNMENT**

Docket Number (Optional)

This is part of the application for a reissue patent based on the original patent identified below.

Name of Patentee(s)

REY ZABAT MENDOZA, WILHELMINA NAVARRO MENDOZA

Patent Number

6,481,591 B2

Date Patent Issued

NOV. 19, 2002

Title of Invention

LAUNDRY ROLL HAMPER

1. ☐ Filed herein is a statement under 37 CFR 3.73(b). (Form PTO/SB/96)
2. ☒ Ownership of the patent is in the inventor(s), and no assignment of the patent is in effect.

One of boxes 1 or 2 above must be checked. If multiple assignees, complete this form for each assignee. If box 2 is checked, skip the next entry and go directly to "Name of Assignee".

The written consent of all assignees and inventors owning an undivided interest in the original patent is included in this application for reissue.

The assignee(s) owning an undivided interest in said original patent is/are _____,
and the assignee(s) consents to the accompanying application for reissue.

Name of assignee/inventor (if not assigned)

REY ZABAT MENDOZA

Signature



Date

10/8/03

Typed or printed name and title of person signing for assignee (if assigned)

This collection of information is required by 37 CFR 1.172. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. B x 1450, Alexandria, VA 22313-1450.

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